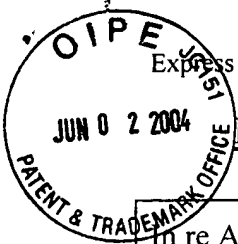


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50623.221

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re Application of:  Hossainy et al.	Examiner: Not assigned
Serial No.: 10/603,794	Art Unit: 1762
Filed: June 25, 2003	Attorney's Docket Number: 50623.221
Title: Thermal Treatment of a Drug Eluting Implantable Medical Device	

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

**Second Preliminary Amendment**

Dear Examiner:

Please amend the application as indicated herein before examination of the application on the merits.



Atty. Docket No. 50623.325

PTO/SB/21 (08-00)

Approved for use through 10/31/2002. OMB 0651-0031

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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**TRANSMITTAL  
FORM**

(to be used for all correspondence after initial filing)

Application Number	10/603,794
Filing Date	June 25, 2003
First Named Inventor	Syed F.A. Hossainy
Group Art Unit	1762
Examiner Name	Not Assigned
Attorney Docket Number	50623.221

Total Number of Pages in This  
Communication

4

**ENCLOSURES (check all that apply)**

<input type="checkbox"/> Deposit Account 07-1850 Authorization <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Express Mail No. EV 339 063 509 US <input checked="" type="checkbox"/> Postage Paid Return Postcard <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Petition for Extension of Time (____ months) (1 page) (in duplicate) <input checked="" type="checkbox"/> Second Preliminary Amendment (3 pages) <input type="checkbox"/> Amendment Transmittal Letter (1 page) (in duplicate) <input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Response to Restriction Requirement <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
<b>Remarks</b>		

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

Firm or Individual name	Squire, Sanders & Dempsey, L.L.P. Paul J. Meyer, Jr. Reg. No. 47,791
Signature	
Date	June 2, 2004

**CERTIFICATE OF MAILING**

I hereby certify that this correspondence is being deposited with the United States Postal Service as Express Mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on this date: June 2, 2004			
Typed or printed name	Rebecca M. Klits		
Signature		Date	June 2, 2004

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